DEPARTMENT OF THE ARMY

For use of this form, see AR 215-3; the proponent agency is ODCSPER.				
THE INFORMATI	ON ON THIS FORM IS			ONLY.
ISSUING OFFICE:		ISSUED TO: (Include ZIP Code)		
USACFSC-HRP-S 4700 King Street Summit Center, 3d Floor Alexandria, VA 22302-440)7			
DEADLINE FOR RETURN TO ISSUING OFFICE OF REQUEST 2. REQUEST IDENTIFICAT OF REQUEST		ION AND DATE	3. REFERRAL LIST NO. AND DATE ISSUED	
4. SYMBOLS USED IN LISTING ELIGIBLES 5. SYMBOLS FOR USE		REPORTING ACTION		
# Application not attached * To provide for declinations	S - Selected D - Declined	CRU - Communication returned unclaimed FR - Failed to reply NS - Not selected		
6. SELECTION FROM CAREER REFERRAL LISTS WI REFERRAL LIST IS ISSUED FOR FILLING THE FO		E WITH THE REQUIREMEN	TS OF AR 215-3. THIS CAF	REER
☐ REGULAR ☐ FULL-TIME ☐ PART TIME		☐ TEMPORARY NUMBER OF VACANCIES		
a. POSITION TITLE		b. SERIES AND GRADE		c. SALARY
d. EMPLOYING NONAPPROPRIATED FUND		e. LOCATION		
7. ACTION	NAME (Addre	ess and telephone number if DA	Form 3/133 is not attached)	
7. ACTION	IVAIVE (Tuure	ss and receptone namoer if DA	Torm 3+33 is not unacreary	
8. TO THE ISSUING OFFICE : REPORT ON REFERRAL LIST IS SUBMITTED AND THE DA FORMS 3433 OF EMPLOYEES NOT SELECTED ARE				
RETURNED.	KRAL LIST IS SUBMITTED A	IND THE DA FORMS 3433 (OF EMPLOYEES NOT SELEC	TED ARE
☐ We desire a further list to fill vacancies.				
☐ Authority to recruit for the abo	ve vacancy is requested.			
☐ See reverse for comments.				
9. DATE	10. NAME & TITLE OF APP	POINTING OFFICER	11. SIGNATURE OF APPO	INTING OFFICER

DA FORM 3800, AUG 86

